PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-002 U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY OR (Column 2) SMALL ENTITY NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASICFEE (37 CFR 1.16(a)) OR TOTAL CLAIMS 28 (37 CFR 1.16(c)) minus 20 = X \$ OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 ·= OR X S MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR-1.16(d)) OR 'If the difference in column 1 is less than zero, entêr "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 3) (Column 1) (Column 2) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE ADDI-ENT RATE ADDI-**AFTER PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) ENDMI Minus OR Independent (37 CFR 1.16(b)) Minus ¥ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST æ REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-**DMENT** AFTER **EXTRA** PREVIOUSLY TIONAL TIONAL AMENDMENT PAID FOR FEE FEE · Total (37 CFR 1.16(c)) Minus OR Z Independent (37 CFR 1.16(b)) Minus OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-IENT. **AFTER** PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) ENDM Minus OR Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE * If the entry in column: 1 is less than the entry in column 2-usses than 20, enter 20.
** If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 020431.0934 Effective October 1, 2001 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN OR SMALL ENTITY TYPE [(Column 1) (Cotamo 2) TOTAL CLAIMS RATE FFF RATE FFF BASIC FEE 370.00 BARIC FEI 740.00 NUMBER FLED MUNCHER EXTRA FOR OR TOTAL CHARGEABLE CLAIMS 9_8 minus 20-44 X\$ 9= X\$18= OR minus 3 NDEPENDENT CLAIMS 84 X42= X84= OR MULTIPLE DEPENDENT CLAIM PRESENT +140a +280= OR * If the difference in column 1 is less than zero, enter "0" in column 2 ବାଟେମ୍ବ TOTAL TOTAL OЯ CLAIMS AS AMENDED - PART II OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 3) (Column i) CLAIMS HO LEST ADDI-ADDI-BEST MARED REMAINING PRESENT RATE TIONAL RATE TIONAL PREVIOUSLY AFTER AMENDMENT EXTRA FEE FEE PAID FOR Minus XS 9= X\$18= 257 2 Total AVAILABLE COP OR Militar ra X42= X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=. +260= OR TOTAL OR ADDIT. FEE ADDIT FEE (Column 3) (Column 2) (Column 1) HURES ADDI-ADOI-NUMBER 0 REMAINING PRESENT 30. 9 TIONAL RATE TIONAL RATE PREVIOUSLY AFTER EXTRA 11 ilia i PAID FOR FEE FEE AMENDMENT Minus X\$18= Total X\$ 9-OR Minum ¥42. YR4= OB FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OA TOTAL OR ADDIT. FEE (Column 1) (Column 2) (Cotumn 3) HOTES! CLAIPS ADDI-ADDI-U REMAINING NUMBER PRESENT 5. 3 TIONAL RATE TIONAL RATE PREVIOUSLY EXTRA **ABBENDMENT** AFTER A PAID FOR FEE FEE ENDMENT 39 • 😙 **Total** Minus. X\$18= X\$ 9-OR • •// Miras Independent 444 XR4= X42= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR * If the entry in column 1 is less than the entry in column 2, write "o" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "30."

**The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. ADDIT, FEE

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FORM PTO-878 (Res. 8/01)

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